CPOCSWR Request for Access

Request Information Type of Account Reco		☐ Chang	je*	☐Delete* Dt to De	elete :
Application(s):	☐ Network/E ☐ CPOL VAE ☐ PPP	B		CSU/ART OPF Tracker BOA (License R	☐ Citrix
	☐ DEUCES ☐ IVRS (ABC ☐ ABC-C Or	·	` '	☐ IVRS HEAT (AB☐ ASPECT (ABC-	
Requestor/Branch: Telephone Number:					
IF SANAR FORM IS N	OT ATTACHED REQUE	EST WILL NOT BE	PROCESSE	D (Only needed for N	ew Accounts
User Information Full Name/Current ID	:				
SSN: Employee Type: Title:	☐ Civilian Employee ☐ Other				
Branch: Telephone: Date Required: Default Printer AKO Email Address:	(ie., CFB 1, C	CFB 2 or ABC Br 1)	ı		
Account Information Type of account:	on ☐ Manager (MGR) ☐ Classifier (COC)	☐ Resource Mar		☐ Admin (MGA) ☐ Personnel Clerk	(COP)
Permissions:	☐ Initiator ☐ Personnelist	☐ Requestor ☐ Approver	☐ Au	thorizer	
Required Access:	(CPAC ID, Major Command, UIC, Org Code)				
Groupbox(es) name to attach to:					
Resumix - Installation	n public folder employ	ee will need acces	s to:		
Additional information	ı:				
*Enter userid in Name	e block under User Inf	ormation			
CPOC Use Only: Userid: Smart RPA Number: Routing Group: Default Printer: Responsibility: Menu:					